

Work Order ID 92776

November-07-12 2:26:12 PM

92776

Page 1

Item ID: D4020-11

Accept

N9000040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: End Mesh, Basket

Start Date: 07/11/2012 Start Qty: 6.00

6

Cust Item ID:

Required Date: 13/11/2012 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: MLS Date: 12-11-07 Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
| D4020 | A |

| | | | | | | | | | |
|-----|----------------|------|--|--|--|--|--|--|--|
| 100 | FLOW WATER JET | 0.00 | | | | | | | |
|-----|----------------|------|--|--|--|--|--|--|--|

100

Waterjet
FLOW CNC Waterjet

Memo
1-Cut as per Dwg D4020
Dwg Rev: A
Prog Rev: A
2-Deburr if necessary

6 0 Jan 12-10-10

| | | | | | | | | | |
|-----|-----------------------------------------|------|--|--|--|--|--|--|--|
| 110 | QC2- Inspect parts off machine FAI/FAIB | 0.00 | | | | | | | |
|-----|-----------------------------------------|------|--|--|--|--|--|--|--|

110

QC
Quality Control

Memo
CUT OUTS WILL BE CUT BY WELDERS WHEN INSTALL ON BASKET

6 0 Jan 12-11-10

| | | | | | | | | | |
|-----|-----------------------------------|------|--|--|--|--|--|--|--|
| 120 | QC8- Inspect parts - second check | 0.00 | | | | | | | |
|-----|-----------------------------------|------|--|--|--|--|--|--|--|

120

QC
Quality Control

Memo
CUT OUTS WILL BE CUT BY WELDERS WHEN INSTALL ON BASKET

6 _____



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|----------------------------------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Work Order ID 92776

November-07-12 2:26:12 PM

92776

Page 2

Item ID: D4020-11

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: End Mesh, Basket

Start Date: 07/11/2012 Start Qty: 6.00

6

Cust Item ID:

Required Date: 13/11/2012 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|-------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 130 | Identify as per dwg & Stock Location: <u>WA</u> | 0.00 | | | | | | | |
| *130* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |
| | | | | | | | | | |
| 140 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *140* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

DAS
24
28

12-11-19

6

12/11/19

ME

12-11-19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | | | | | | | | | | | | | | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | | | | | | | | | | | | | | | |

Picklist Print

November-07-12 2:26:15 PM

Page 1

Work Order ID: 92776

92776

Parent Item: D4020-11

D4020-11

Parent Item Name: End Mesh, Basket

Start Date: 07/11/2012

Required Date: 13/11/2012

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP RevA: new issue DD 09.11.26 verified by:EC IPP Rev:B as
per dwg revA 10.03.15 verified by:EC IPP Rev:C 10.06.14 remove
cut out from dxf, will be made when install on basket DD verf:JLM

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| M304EX0.75-16F | | Purchased | No | | | 100 | sf | 1,225.311 | 2.694 | 17.01474 | | | |

M304EX0 75-16F

Expanded Metal Flat SS

**

17.1

Jun 21-10

| Location | Loc Qty | Loc Code |
|----------|-------------|----------|
| WA | 320 | |
| 123448 | 320 | |
| WA035 | 905.3112637 | |
| 117197 | 102.9036 | |
| 120917 | 50.88673 | |
| 121521 | 0.00013372 | |
| 122080 | 63.0699 | |
| 122315 | 11.245 | |
| 122534 | 274.2 | |
| 122604 | 79.438 | |
| 122884 | 36.5679 | |
| 123200 | 287 | |

123200

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
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| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|-------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

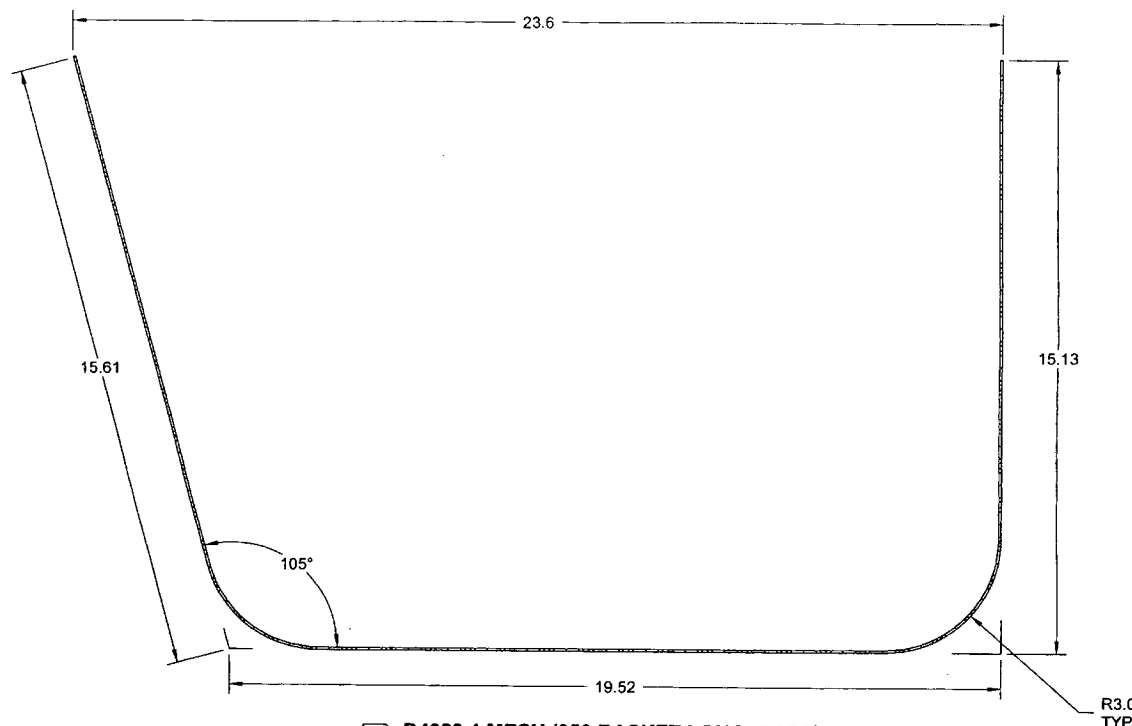
QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
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| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
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| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | |
| <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |



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92776 MJS
12-11-07

9 D4020-1 MESH (350 BASKET LONG, BASE)
(SEE D4020-1F FOR LENGTH)

9 D4020-3 (350 BASKET SHORT, BASE)
(SEE D4020-3F FOR LENGTH)

R3.0
TYP

RELEASED
2010-03-12
MJS

NOTES:

- 1) MATERIAL-1: MAKE FROM D4020-1F
-3: MAKE FROM D4020-3F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE D4020-1F & D4020-3F
- 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
- 9) PRE-FORMING OF MESH PER SHOP OPTION, THIS VIEW MAY BE USED FOR REF ONLY

| A NEW ISSUE | | JPH | 10.03.04 |
|-------------|-------------|-----|----------|
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | AJS | | |
| DRAWN | JPH | | |
| CHECKED | JPH | | |
| MFG. APPR. | JPH | | |
| APPROVED | JPH | | |
| DE APPR. | JPH | | |
| DATE | 10.03.04 | | |

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. REV. A
D4020 SHEET 1 OF 4
TITLE SCALE
350 BASKET MESH (BASE) NTS

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NCR: Yes / No

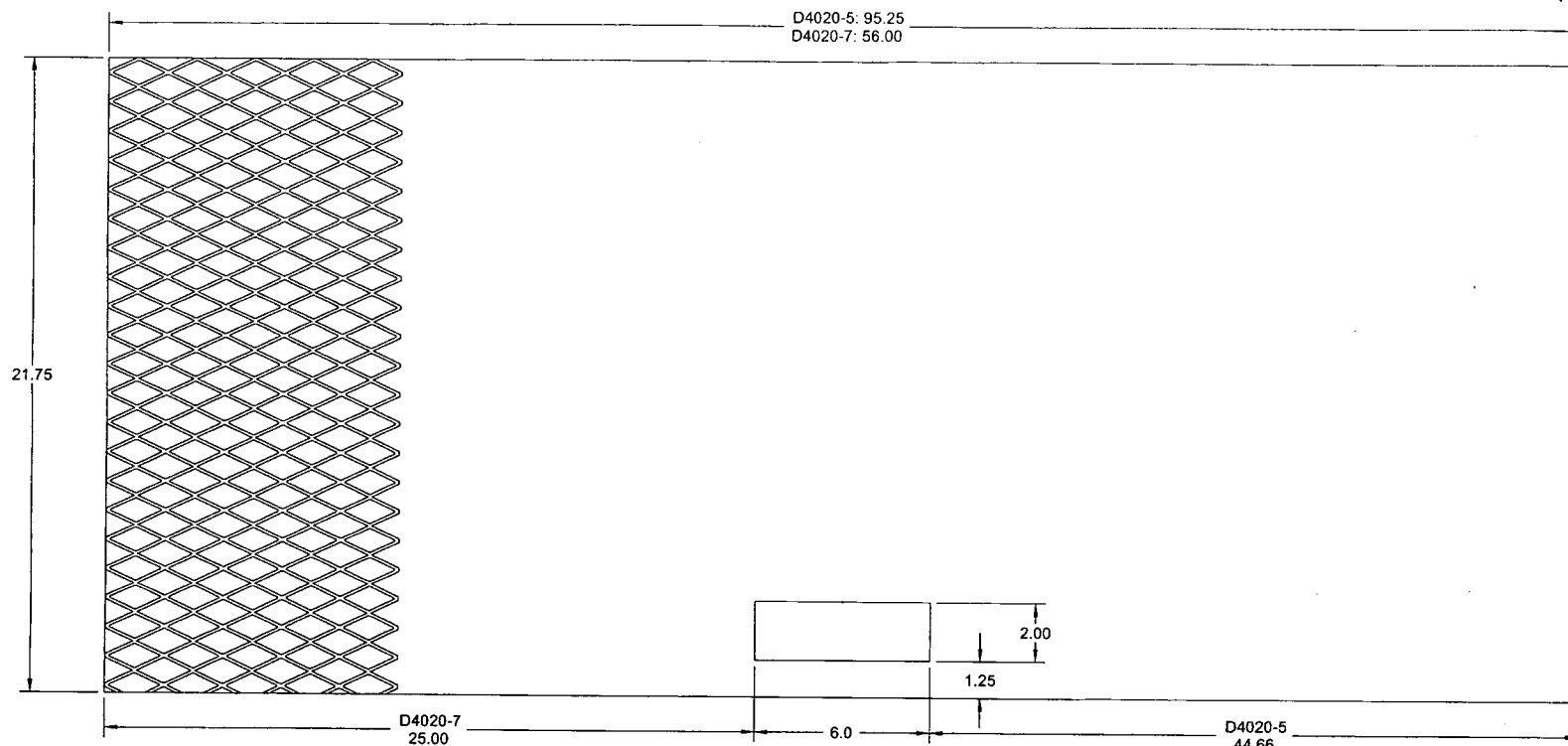
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

92776



9 D4020-5 MESH (350 BASKET LONG, LID)
(LOCAL SECTION MESH SHOWN FOR CLARITY)

9 D4020-7 MESH (350 BASKET SHORT, LID)
(LOCAL SECTION MESH SHOWN FOR CLARITY)

NOTES:

- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F
REF DART SPEC. M304EX0.75-16F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT -5: 0.80 lbs APPROX
-7: 4.49 lbs APPROX
- 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
- 9) TOLERANCE ON XX.XX DIMENSIONS ± 0.06 .

RELEASED
2010-03-12
MD

| | | | |
|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN | AJS | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWN | JPH | | |
| CHECKED | JP | DRAWING NO. | REV. A |
| MFG. APPR. | JP | D4020 | SHEET 2 OF 4 |
| APPROVED | MD | TITLE | SCALE |
| DE APPR. | MD | 350 BASKET MESH (BASE) | NTS |
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NCR: Yes / No

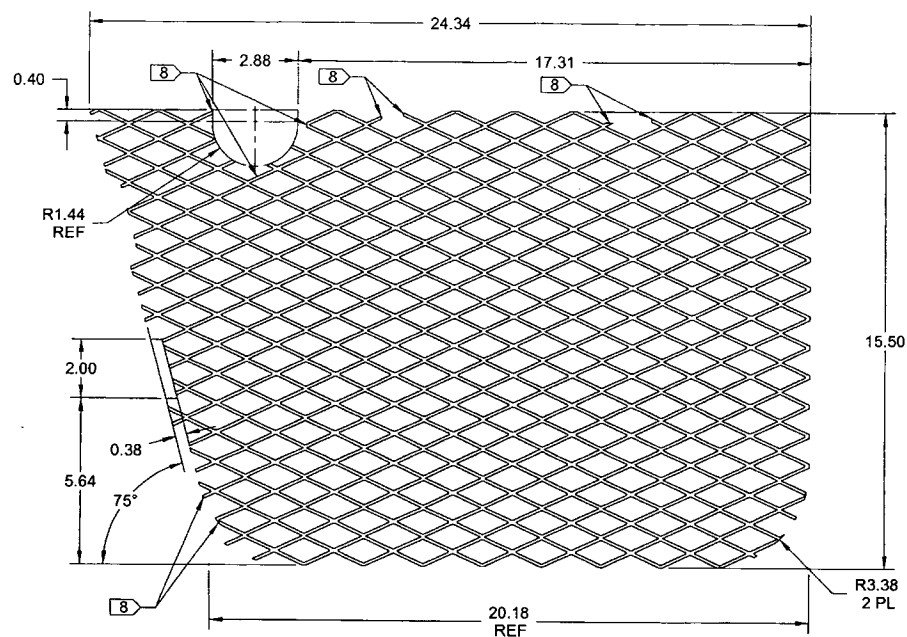
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

92776



9 D4020-11 END MESH, BASKET

NOTES:

- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F
REF DART SPEC. M304EX0.75-16F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.22 lbs
- 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
- 9) TOLERANCE ON XX.XX DIMENSIONS ± 0.06 .

RELEASED
2010-03-12

| | | | |
|------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN | AJS | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWN | JPH | | |
| CHECKED | <i>[Signature]</i> | DRAWING NO. | REV. A |
| MFG. APPR. | <i>[Signature]</i> | D4020 | SHEET 3 OF 4 |
| APPROVED | <i>[Signature]</i> | TITLE | SCALE |
| DE APPR. | <i>[Signature]</i> | 350 BASKET MESH (BASE) | NTS |
| DATE | 10.03.04 | COPYRIGHT © 2010 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small> | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

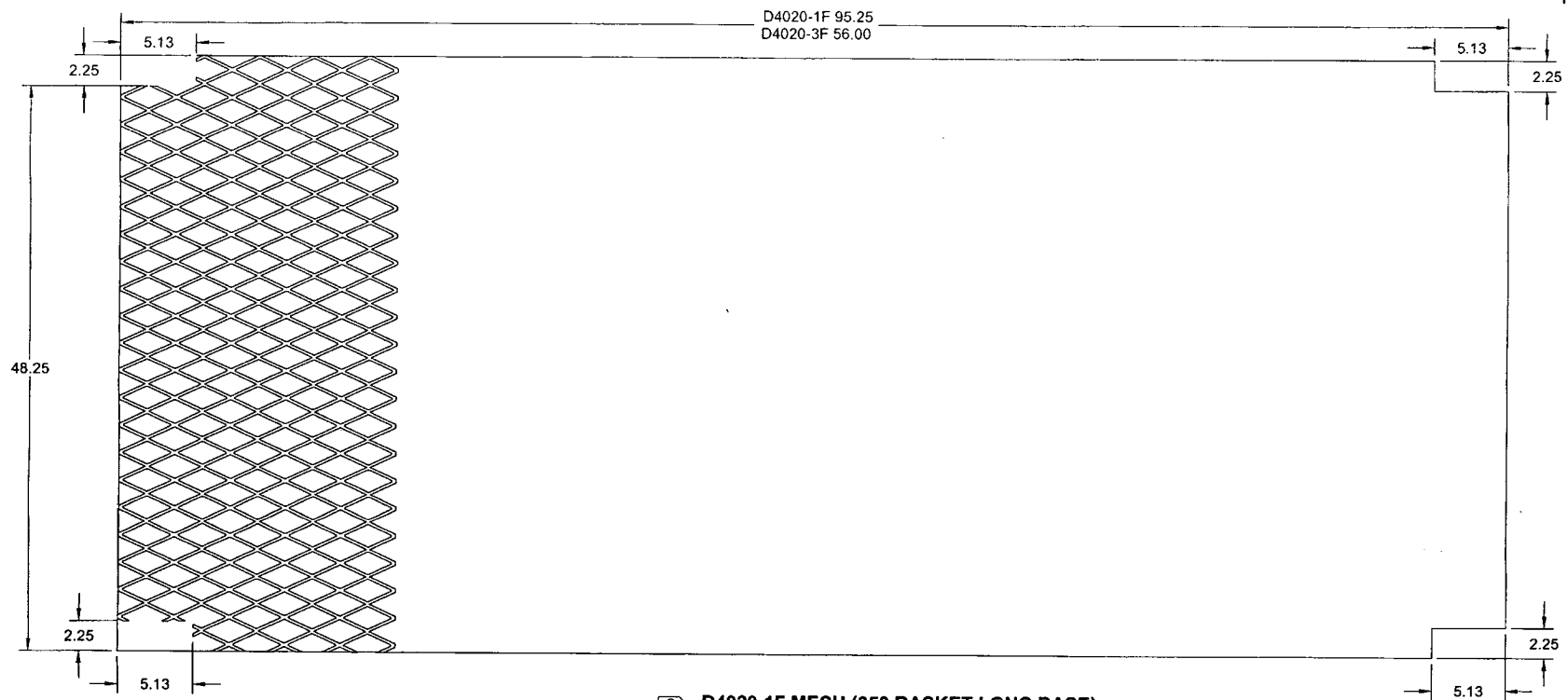
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|----------------------------------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

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| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
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92776

D4020-1F 95.25
D4020-3F 56.00



- 8 D4020-1F MESH (350 BASKET LONG BASE)
(LOCAL SECTION MESH SHOWN FOR CLARITY)
- 8 D4020-3F MESH (350 BASKET SHORT, BASE)
(LOCAL SECTION MESH SHOWN FOR CLARITY)

RELEASED
2010-03-13
AWP

- NOTES:**
- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F
REF DART SPEC. M304EX0.75-16F
 - 2) FINISH: NONE
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: N/A
 - 6) IDENTIFICATION: N/A
 - 7) WEIGHT -1F: 17.33 lbs APPROX
-3F: 10.16 lbs APPROX
 - 8) TOLERANCE ON XX.XX DIMENSIONS ± 0.06 .

| | | | |
|------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| DESIGN | AJS | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWN | JPH | | |
| CHECKED | <i>[Signature]</i> | DRAWING NO. D4020 | REV. A SHEET 4 OF 4 |
| MFG. APPR. | <i>[Signature]</i> | TITLE 350 BASKET MESH (BASE) | SCALE NTS |
| DE APPR. | <i>[Signature]</i> | <small>COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |
| DATE | 10.03.04 | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |